

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

CVS Health PAC

ADDRESS (number and street)

1275 Pennsylvania Avenue, NW

Suite 700

☐ Check if different than previously reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00384818

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
04 01 2016

through

M M M / D D D / Y Y Y Y Y Y
04 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Billy Raines

Signature of Treasurer

Billy Raines

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
05 20 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X

Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CVS Health PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
04		01		2016

To:

M M	/	D D	/	Y Y Y Y Y Y
04		30		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y Y 2016</div>		<div>168626.29</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>330126.06</div>	
(c) Total Receipts (from Line 19)	<div>36779.17</div>	<div>268228.98</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>366905.23</div>	<div>436855.27</div>
7. Total Disbursements (from Line 31).....	<div>-7650.00</div>	<div>62300.04</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>374555.23</div>	<div>374555.23</div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CVS Health PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y
04	/	30	/	2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other
Than Political Committees

(i) Itemized (use Schedule A).....

26816.23

96711.01

(ii) Unitemized

9962.94

58814.15

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

36779.17

155525.16

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

36779.17

155525.16

12. Transfers From Affiliated/Other

Party Committees.....

0.00

112703.82

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

36779.17

268228.98

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ►

36779.17

268228.98

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	67500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.04
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.04
29. Other Disbursements	-10650.00	-5200.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	-7650.00	62300.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-7650.00	62300.04

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	36779.17	155525.16
34. Total Contribution Refunds (from Line 28(d))	0.00	0.04
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36779.17	155525.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Lora Armstrong

Mailing Address 2211 Sanders Rd

City State Zip Code
 Northbrook IL 60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 01 / 2016

Transaction ID : 20160509171312-20

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lora Armstrong

Mailing Address 2211 Sanders Rd

City State Zip Code
 Northbrook IL 60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : 20160509171312-21

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lora Armstrong

Mailing Address 2211 Sanders Rd

City State Zip Code
 Northbrook IL 60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 29 / 2016

Transaction ID : 20160509171312-22

Amount of Each Receipt this Period

38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

115.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Tracy Bahl

Mailing Address 695 George Washington Hwy

City State Zip Code
 Lincoln RI 02865-4257

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

EVP Health Plans

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 12 / 2016

Transaction ID : 20160509171312-36

Amount of Each Receipt this Period

333.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cheryl Bailey

Mailing Address 2211 Sanders Rd

City State Zip Code
 Northbrook IL 60062-6150

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Specialty Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.07

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 01 / 2016

Transaction ID : 20160509171312-37

Amount of Each Receipt this Period

69.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Cheryl Bailey

Mailing Address 2211 Sanders Rd

City State Zip Code
 Northbrook IL 60062-6150

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Specialty Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.07

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : 20160509171312-38

Amount of Each Receipt this Period

69.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

471.79

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Cheryl Bailey

Mailing Address 2211 Sanders Rd

City	State	Zip Code
Northbrook	IL	60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Specialty Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2016

Transaction ID : 20160509171312-39

Amount of Each Receipt this Period

69.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Scott Baker

Mailing Address 1 Cvs Dr

City	State	Zip Code
Woonsocket	RI	02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

EVP, Head of Retail Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

Transaction ID : 20160509171312-41

Amount of Each Receipt this Period

333.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. John Barron

Mailing Address 1700 Highland Corporate Dr

City	State	Zip Code
Cumberland	RI	02864-1799

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Digital Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

Transaction ID : 20160509171312-60

Amount of Each Receipt this Period

62.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

465.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 98

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Katherine Bell

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Advisor, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	01	/	2016

Transaction ID : 20160509171312-68

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Katherine Bell

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Advisor, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	15	/	2016

Transaction ID : 20160509171312-69

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Katherine Bell

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Advisor, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	29	/	2016

Transaction ID : 20160509171312-70

Amount of Each Receipt this Period

28.84

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.52

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 98

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Dimitri Betses

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP, Government Services

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016
Transaction ID : 20160509171312-88

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lisa Bisaccia

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

EVP, CVS Health & CHRO

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016
Transaction ID : 20160509171312-90

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Scott BondMailing Address 750 W John Carpenter Fwy
Ste 1200

City

Irving

State

TX

Zip Code

75039-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Sales

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016
Transaction ID : 20160509171312-103

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

641.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 98

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Eileen Boone

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP,Corp Social Resp and Phil

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-107

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Eva Boratto

Mailing Address 200 Highland Corporate Dr

City

Cumberland

State

RI

Zip Code

02864-1786

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Finance & Control CVS Heal

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-114

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Diane Bourque

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director,IT Systems

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-119

Amount of Each Receipt this Period

62.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

412.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 98

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Karen Brown

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Corporate Communications

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-133

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael Buckless

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Real Estate

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-138

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. John Buckley

Mailing Address 200 Highland Corporate Dr

City

Cumberland

State

RI

Zip Code

02864-1786

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Pharm & Clinical Prgms

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-139

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

450.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Frederick Burns

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Materials Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-146

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Frederick Burns

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Materials Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-147

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Frederick Burns

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Materials Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-148

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. David Casey

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Diversity

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-161

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Henry Casillas

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

AVP

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-162

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gregory Cassin

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Region Manager, Fld Mgmt

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

333.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-167

Amount of Each Receipt this Period

83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

433.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Carolyn Castel

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Corporate Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-168

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Nancy Christal

Mailing Address 670 Post Rd
Ste 210

City

Scarsdale

State

NY

Zip Code

10583-5024

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP, Investor Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-181

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Keith Christensen

Mailing Address 695 George Washington Hwy

City

Lincoln

State

RI

Zip Code

02865-4257

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Shared Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-182

Amount of Each Receipt this Period

62.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

512.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Antonios Clapsis

Mailing Address 1275 Pennsylvania Ave NW
Ste 700

City Washington State DC Zip Code 20004-2448

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Business Development BP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-184

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stephen Cohan

Mailing Address 695 George Washington Hwy

City Lincoln State RI Zip Code 02865-4257

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

834.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-206

Amount of Each Receipt this Period

208.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Darrell Cole, II

Mailing Address 1 Cvs Dr

City Woonsocket State RI Zip Code 02895-6146

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

Pharmacy Supv,Fld Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-207

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

338.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Christopher Cox

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Store Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-229

Amount of Each Receipt this Period

166.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Christopher Crisafulli

Mailing Address 200 Highland Corporate Dr

City

Cumberland

State

RI

Zip Code

02864-1786

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, MC Rpg & A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-230

Amount of Each Receipt this Period

62.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ken Czarnecki

Mailing Address 750 W John Carpenter Fwy
Ste 1200

City

Irving

State

TX

Zip Code

75039-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

866.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-239

Amount of Each Receipt this Period

216.67

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

445.82

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Amita Dasmahapatra

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, Medical Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-241

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amita Dasmahapatra

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, Medical Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-242

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amita Dasmahapatra

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, Medical Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-243

Amount of Each Receipt this Period

28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Carol De Nale

Mailing Address 200 Highland Corporate Dr

City

Cumberland

State

RI

Zip Code

02864-1786

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-253

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Patrick Dennis

Mailing Address 1 Great Valley Blvd

City

Wilkes Barre

State

PA

Zip Code

18706-5324

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director,PBM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-259

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Patrick Dennis

Mailing Address 1 Great Valley Blvd

City

Wilkes Barre

State

PA

Zip Code

18706-5324

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director,PBM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-260

Amount of Each Receipt this Period

28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

307.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Patrick Dennis

Mailing Address 1 Great Valley Blvd

City

Wilkes Barre

State

PA

Zip Code

18706-5324

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director,PBM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-261

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. David Denton

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

EVP & CFO, CVS Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.32

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-262

Amount of Each Receipt this Period

208.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Edward Devaney

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Aetna SBU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-263

Amount of Each Receipt this Period

28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

266.03

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Edward Devaney

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Aetna SBU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	6

Transaction ID : 20160509171312-264

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Edward Devaney

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Aetna SBU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	6

Transaction ID : 20160509171312-265

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Heidi Devlin

Mailing Address 1026 Park East Dr

City

Woonsocket

State

RI

Zip Code

02895-6181

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Advertising

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	6

Transaction ID : 20160509171312-266

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

157.70

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. James Dixon

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-270

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. James Dixon

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-271

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. James Dixon

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : 20160509171312-272

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Russell Dossey

Mailing Address 475 Park East Dr

City

Woonsocket

State

RI

Zip Code

02895-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Visual Merchandising

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

Transaction ID : 20160509171312-275

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Christopher Dupaul

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Product Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

Transaction ID : 20160509171312-288

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Shawn Eaton

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Region Manager, Fld Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

Transaction ID : 20160509171312-291

Amount of Each Receipt this Period

83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

483.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Shelly Edge

Mailing Address 1 Cvs Dr

City State Zip Code
Woonsocket RI 02895-6146

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

Region Manager, Fld Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-292

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. David Falkowski

Mailing Address 1 Cvs Dr

City State Zip Code
Woonsocket RI 02895-6146

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP & Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-315

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Arvid Faudskar, II

Mailing Address 4121 E Cotton Center Blvd

City State Zip Code
Phoenix AZ 85040-8849

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Clinical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-323

Amount of Each Receipt this Period

38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

371.79

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Arvid Faudskar, II

Mailing Address 4121 E Cotton Center Blvd

City State Zip Code
Phoenix AZ 85040-8849

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Clinical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-324

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Arvid Faudskar, II

Mailing Address 4121 E Cotton Center Blvd

City State Zip Code
Phoenix AZ 85040-8849

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Clinical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : 20160509171312-325

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lucia Feczko

Mailing Address 2211 Sanders Rd

City State Zip Code
Northbrook IL 60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director RPh,Special Pharm Pgm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-326

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

111.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Lucia Feczko

Mailing Address 2211 Sanders Rd

City State Zip Code
 Northbrook IL 60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director RPh,Special Pharm Pgm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : 20160509171312-327

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lucia Feczko

Mailing Address 2211 Sanders Rd

City State Zip Code
 Northbrook IL 60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director RPh,Special Pharm Pgm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 29 / 2016

Transaction ID : 20160509171312-328

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Tracy Fields

Mailing Address 6935 Alamo Downs Pkwy

City State Zip Code
 San Antonio TX 78238-4519

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director,Strategic Accounts IC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 29 / 2016

Transaction ID : 20160509171312-332

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 OF 98

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Brian Files

Mailing Address 1275 Pennsylvania Ave NW
Ste 700

City Washington State DC Zip Code 20004-2448

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

Exec Advisor, Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-333

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Brian Files

Mailing Address 1275 Pennsylvania Ave NW
Ste 700

City Washington State DC Zip Code 20004-2448

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

Exec Advisor, Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-334

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Brian Files

Mailing Address 1275 Pennsylvania Ave NW
Ste 700

City Washington State DC Zip Code 20004-2448

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

Exec Advisor, Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-335

Amount of Each Receipt this Period

28.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Ronald Finch

Mailing Address 11162 Renner Blvd

City Lenexa State KS Zip Code 66219-9621

FEC ID number of contributing federal political committee.

C

Name of Employer CVS Health Occupation GM Specialty Pharmacy Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-336

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ronald Finch

Mailing Address 11162 Renner Blvd

City Lenexa State KS Zip Code 66219-9621

FEC ID number of contributing federal political committee.

C

Name of Employer CVS Health Occupation GM Specialty Pharmacy Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-337

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ronald Finch

Mailing Address 11162 Renner Blvd

City Lenexa State KS Zip Code 66219-9621

FEC ID number of contributing federal political committee.

C

Name of Employer CVS Health Occupation GM Specialty Pharmacy Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-338

Amount of Each Receipt this Period

28.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 OF 98

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Christine Fitzgerald

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director,HR Bus Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-340

Amount of Each Receipt this Period

62.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jon Fliss

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP, Comp & Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-344

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Joshua Flum

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

EVP,Pharmacy Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-345

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

562.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 98

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Helena Foulkes

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

President, CVS Pharmacy

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1666.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	6

Transaction ID : 20160509171312-346

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kathryn Fowler

Mailing Address 3888 Highway 90

City

Pace

State

FL

Zip Code

32571-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Pharmacy Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	6

Transaction ID : 20160509171312-352

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Joseph FrendoMailing Address 750 W John Carpenter Fwy
Ste 1200

City

Irving

State

TX

Zip Code

75039-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP,PBM Strategic Ops & Svcs

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1666.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	6

Transaction ID : 20160509171312-355

Amount of Each Receipt this Period

416.67

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

883.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 OF 98

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Stephen Frumento

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Region Manager, Fld Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-359

Amount of Each Receipt this Period

108.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stephen Gold

Mailing Address 200 Campus Dr
Ste 310

City

Florham Park

State

NJ

Zip Code

07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

EVP, CVS Health & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-414

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Charles Golden, Jr.

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Construction & Prop Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-418

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

624.99

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 98

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. William Grambley

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Managed Medicaid

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	6

Transaction ID : 20160509171312-434

Amount of Each Receipt this Period

62.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tracy Grunsfeld

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Product Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	6

Transaction ID : 20160509171312-448

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Colvin Guinn

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Network

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.21

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

Transaction ID : 20160509171312-456

Amount of Each Receipt this Period

57.69

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

320.19

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Colvin Guinn

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Network

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.21

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-457

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Colvin Guinn

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Network

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.21

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-458

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Joseph Haas, Jr.

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Region Manager, Fld Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.32

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-460

Amount of Each Receipt this Period

83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

198.71

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Paula Harries

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Marketing Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-477

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paula Harries

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Marketing Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-478

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Terry Harris

Mailing Address 201 E 4th St

900 Omnicare Center

City

Cincinnati

State

OH

Zip Code

45202-4248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Omnicare, Inc.

Occupation

Senior Director, Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

04 / 08 / 2016

Transaction ID : 20160509171312-480

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

97.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Terry Harris

Mailing Address 201 E 4th St

900 Omnicare Center

City

Cincinnati

State

OH

Zip Code

45202-4248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Omnicare, Inc.

Occupation

Senior Director, Operations

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

04 / 22 / 2016

Transaction ID : 20160509171312-481

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stephen Haught

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Account Management

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-498

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stephen Heidenthal

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Pharmacy Merchandising

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-500

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Courtney Herring

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Advisor, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-502

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Courtney Herring

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Advisor, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-503

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Courtney Herring

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Advisor, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : 20160509171312-504

Amount of Each Receipt this Period

28.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

86.52

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Allen Horne

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Government Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

565.38

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-536

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Allen Horne

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Government Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

565.38

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-537

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Allen Horne

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Government Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

565.38

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-538

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

119.23

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Allen Horne

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Government Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

565.38

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-539

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Allen Horne

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Government Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

565.38

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-540

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Allen Horne

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Government Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

565.38

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-541

Amount of Each Receipt this Period

19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

88.46

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. John Hoyceanyls

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Construction & Prop Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.32

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-546

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Syed Husain

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Real Estate Corp Acq

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.32

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-567

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Candace Jodice

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,HR Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-590

Amount of Each Receipt this Period

62.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

229.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Brenna Jordan

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP & Sr Legal Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-597

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John Joyner

Mailing Address 750 W John Carpenter Fwy
Ste 1200

City

Irving

State

TX

Zip Code

75039-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

EVP Sales & Account Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-598

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Seth Kamen

Mailing Address 475 Park East Dr

City

Woonsocket

State

RI

Zip Code

02895-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Customer Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-611

Amount of Each Receipt this Period

125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

691.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Michael King

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

District Manager, Fld Mgmt

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-637

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jeffrey Knudson

Mailing Address 200 Highland Corporate Dr

City

Cumberland

State

RI

Zip Code

02864-1786

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP, Finance Retail

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

833.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-656

Amount of Each Receipt this Period

208.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jeffrey Koelsch

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Account Management FEP

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

259.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-658

Amount of Each Receipt this Period

28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

362.18

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Jeffrey Koelsch

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Account Management FEP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-659

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jeffrey Koelsch

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Account Management FEP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : 20160509171312-660

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Steven Kunz

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Strategic Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-668

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.70

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Steven Kunz

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Strategic Sales

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2016

Transaction ID : 20160509171312-669

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Steven Kunz

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Strategic Sales

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2016

Transaction ID : 20160509171312-670

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mary Langowski

Mailing Address 1275 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004-2404

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

EVP, Strategy, BusDev, and M&A

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1333.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

Transaction ID : 20160509171312-686

Amount of Each Receipt this Period

333.33

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

403.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. John LaVin

Mailing Address 9501 E Shea Blvd

City State Zip Code
 Scottsdale AZ 85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Network Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 12 / 2016

Transaction ID : 20160509171312-688

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Donna Lecky

Mailing Address 201 E 4th St
 900 Omnicare Center

City State Zip Code
 Cincinnati OH 45202-4248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Omnicare, Inc.

Occupation

Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 08 / 2016

Transaction ID : 20160509171312-695

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Donna Lecky

Mailing Address 201 E 4th St
 900 Omnicare Center

City State Zip Code
 Cincinnati OH 45202-4248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Omnicare, Inc.

Occupation

Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016

Transaction ID : 20160509171312-696

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

205.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Matthew Leonard

Mailing Address 695 George Washington Hwy

City State Zip Code
 Lincoln RI 02865-4257

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

EVP,Pharma,Ret&LTC Cont Rx Pur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 12 / 2016

Transaction ID : 20160509171312-699

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tammy Lewis

Mailing Address 1 Cvs Dr

City State Zip Code
 Woonsocket RI 02895-6146

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, PBM Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 12 / 2016

Transaction ID : 20160509171312-701

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ronald Link

Mailing Address 1 Cvs Dr

City State Zip Code
 Woonsocket RI 02895-6146

FEC ID number of contributing federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Logistics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 12 / 2016

Transaction ID : 20160509171312-712

Amount of Each Receipt this Period

180.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

530.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Gary Loeber

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Trade Relations

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2		2	0	1	6		

Transaction ID : 20160509171312-717

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Alan Lotvin

Mailing Address 695 George Washington Hwy

City

Lincoln

State

RI

Zip Code

02865-4257

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

EVP Specialty

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1666.64

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2		2	0	1	6		

Transaction ID : 20160509171312-728

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Wayne Lum

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Region Manager, Fld Mgmt

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2		2	0	1	6		

Transaction ID : 20160509171312-732

Amount of Each Receipt this Period

75.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

616.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Bruce Lyons

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

667.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-733

Amount of Each Receipt this Period

166.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bruce MacRae

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-737

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bruce MacRae

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-738

Amount of Each Receipt this Period

55.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

276.83

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Bruce MacRae

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-739

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Melissa Mann

Mailing Address 1275 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004-2404

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Govnmt Relations CVS Healt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.64

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-745

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stephen Manning

Mailing Address 200 Campus Dr
Ste 310

City

Florham Park

State

NJ

Zip Code

07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-746

Amount of Each Receipt this Period

38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

510.12

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 98

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Stephen ManningMailing Address 200 Campus Dr
Ste 310City State Zip Code
Florham Park NJ 07932-1007FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 15 / 2016**Transaction ID : 20160509171312-747**

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stephen ManningMailing Address 200 Campus Dr
Ste 310City State Zip Code
Florham Park NJ 07932-1007FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2016**Transaction ID : 20160509171312-748**

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Robert Marcello

Mailing Address 1 Cvs Dr

City State Zip Code
Woonsocket RI 02895-6146FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 12 / 2016**Transaction ID : 20160509171312-752**

Amount of Each Receipt this Period

80.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

156.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. James Margiotta

Mailing Address 750 W John Carpenter Fwy
Ste 1200

City Irving State TX Zip Code 75039-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

667.32

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-754

Amount of Each Receipt this Period

166.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Olga Matlin

Mailing Address 2211 Sanders Rd

City Northbrook State IL Zip Code 60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-771

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Olga Matlin

Mailing Address 2211 Sanders Rd

City Northbrook State IL Zip Code 60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-772

Amount of Each Receipt this Period

28.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

224.51

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Olga Matlin

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, Analytics

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

259.56

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-773

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kimberly McDonnell

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Medicare Health Plan

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

328.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-781

Amount of Each Receipt this Period

82.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael McEnany

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VPMM

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-786

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

210.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Michael McGuire

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Investor Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-787

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Colleen McIntosh

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP,Legal Corporate Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-791

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Larry Merlo

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

President & CEO, CVS Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-806

Amount of Each Receipt this Period

416.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

866.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Mary Meyer

Mailing Address 29100 Aurora Rd

City

Solon

State

OH

Zip Code

44139-1855

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Marketing Med D

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.21

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-810

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mary Meyer

Mailing Address 29100 Aurora Rd

City

Solon

State

OH

Zip Code

44139-1855

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Marketing Med D

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.21

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-811

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mary Meyer

Mailing Address 29100 Aurora Rd

City

Solon

State

OH

Zip Code

44139-1855

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Marketing Med D

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.21

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-812

Amount of Each Receipt this Period

57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

173.07

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 54 OF 98

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Giovanni Minardi

Mailing Address 200 Campus Dr
Ste 310

City State Zip Code
Florham Park NJ 07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, IT Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-827

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Giovanni Minardi

Mailing Address 200 Campus Dr
Ste 310

City State Zip Code
Florham Park NJ 07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, IT Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-828

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Giovanni Minardi

Mailing Address 200 Campus Dr
Ste 310

City State Zip Code
Florham Park NJ 07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, IT Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : 20160509171312-829

Amount of Each Receipt this Period

28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 55 OF 98

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Thomas Moffatt

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP & Assistant General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-833

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Richard Molchan

Mailing Address 475 Park East Dr

City

Woonsocket

State

RI

Zip Code

02895-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Vice President, Visual Merch

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-834

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Thomas Moriarty

Mailing Address 200 Campus Dr
Ste 310

City

Florham Park

State

NJ

Zip Code

07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

EVP, Chief HSO & Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-837

Amount of Each Receipt this Period

416.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

641.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. John Murphy

Mailing Address 1 Cvs Dr

City State Zip Code
Woonsocket RI 02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
CVS Health VP Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-849

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kevin Murphy

Mailing Address 695 George Washington Hwy

City State Zip Code
Lincoln RI 02865-4257

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
CVS Health VP Specialty & Infusion

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-850

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. James Murray

Mailing Address 1 Cvs Dr

City State Zip Code
Woonsocket RI 02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
CVS Health VP, MC IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-851

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 98

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Thomas Myatt

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, IT Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

Transaction ID : 20160509171312-852

Amount of Each Receipt this Period

62.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Philip Nalaboff

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Specialty Pharmacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

Transaction ID : 20160509171312-855

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Roshan Navagamuwa

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP, Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

Transaction ID : 20160509171312-856

Amount of Each Receipt this Period

200.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

345.83

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Joan O'Rourke

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Specialty Program Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-888

Amount of Each Receipt this Period

166.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dawn Pagano

Mailing Address 200 Campus Dr
Ste 310

City

Florham Park

State

NJ

Zip Code

07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-896

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Pushpendu Pal

Mailing Address 2100 E Lake Cook Rd

City

Buffalo Grove

State

IL

Zip Code

60089-1999

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP PBM IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-900

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

516.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Anthony Palmieri

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Clinical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1		2	0	1	6		

Transaction ID : 20160509171312-904

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Anthony Palmieri

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Clinical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	5		2	0	1	6	

Transaction ID : 20160509171312-905

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Anthony Palmieri

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Clinical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4				2	9		2	0	1	6	

Transaction ID : 20160509171312-906

Amount of Each Receipt this Period

38.46

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.38

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 98

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. David Palombi

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP,Chief Comm Officer CVS Hea

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2016

Transaction ID : 20160509171312-907

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Daniel Parker

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Brand Compliance

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

259.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2016

Transaction ID : 20160509171312-908

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Daniel Parker

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Brand Compliance

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

259.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2016

Transaction ID : 20160509171312-909

Amount of Each Receipt this Period

28.85

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

307.70

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 61 OF 98

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Daniel Parker

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Brand Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : 20160509171312-910

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lawrence Parks

Mailing Address 200 Highland Corporate Dr

City

Cumberland

State

RI

Zip Code

02864-1786

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-914

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Angela Patterson

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, MC Chief Nursing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-922

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

378.85

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Thomas Pawlik

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-924

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kathy-Jo Payette

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP, Human Resources Retail

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-925

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Douglas Phillips

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP & Assistant General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-940

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

625.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 98

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Grant Pill

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Retail Omni Channel Digit

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016**Transaction ID : 20160509171312-944**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Natalie Pons

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Asst General Counsel

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016**Transaction ID : 20160509171312-964**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jennifer Powers

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Pharmacy Supv, Fld Mgmt

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016**Transaction ID : 20160509171312-972**

Amount of Each Receipt this Period

86.67

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

436.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Ann Louise Puopolo

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Enterprise Patient Safety

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-980

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. David Purdy

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

AVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-981

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jeffrey Raman

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

AVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-993

Amount of Each Receipt this Period

83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

366.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 65 OF 98

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Dina Reynolds

Mailing Address 6950 Alamo Downs Pkwy
Ste 140A

City San Antonio State TX Zip Code 78238-4501

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Accreditation Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-1015

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dina Reynolds

Mailing Address 6950 Alamo Downs Pkwy
Ste 140A

City San Antonio State TX Zip Code 78238-4501

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Accreditation Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-1016

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dina Reynolds

Mailing Address 6950 Alamo Downs Pkwy
Ste 140A

City San Antonio State TX Zip Code 78238-4501

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Accreditation Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-1017

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Stephen Rill

Mailing Address 2211 Sanders Rd

City State Zip Code
 Northbrook IL 60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Area Sales TPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 01 / 2016

Transaction ID : 20160509171312-1034

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stephen Rill

Mailing Address 2211 Sanders Rd

City State Zip Code
 Northbrook IL 60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Area Sales TPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : 20160509171312-1035

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stephen Rill

Mailing Address 2211 Sanders Rd

City State Zip Code
 Northbrook IL 60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Area Sales TPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 29 / 2016

Transaction ID : 20160509171312-1036

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

105.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Richard Riva

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-1043

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Richard Riva

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-1044

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Richard Riva

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : 20160509171312-1045

Amount of Each Receipt this Period

57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

173.07

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Jonathan Roberts

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

President, CVS Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.64

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-1049

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Judith Sansone

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Merchandising

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-1072

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Sarocka

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Professional Clinical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-1082

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

691.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Mark Satre

Mailing Address 9501 E Shea Blvd

City	State	Zip Code
Scottsdale	AZ	85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Sales Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2016

Transaction ID : 20160509171312-1083

Amount of Each Receipt this Period

46.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mark Satre

Mailing Address 9501 E Shea Blvd

City	State	Zip Code
Scottsdale	AZ	85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Sales Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2016

Transaction ID : 20160509171312-1084

Amount of Each Receipt this Period

46.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mark Satre

Mailing Address 9501 E Shea Blvd

City	State	Zip Code
Scottsdale	AZ	85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Sales Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2016

Transaction ID : 20160509171312-1085

Amount of Each Receipt this Period

46.15

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

138.45

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 98

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Marissa Schlaifer

Mailing Address 1275 Pennsylvania Ave NW
Ste 700

City Washington State DC Zip Code 20004-2448

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-1092

Amount of Each Receipt this Period

92.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Marissa Schlaifer

Mailing Address 1275 Pennsylvania Ave NW
Ste 700

City Washington State DC Zip Code 20004-2448

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-1093

Amount of Each Receipt this Period

92.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Marissa Schlaifer

Mailing Address 1275 Pennsylvania Ave NW
Ste 700

City Washington State DC Zip Code 20004-2448

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : 20160509171312-1094

Amount of Each Receipt this Period

92.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

276.90

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Thomas Schleigh Jr

Mailing Address 201 E 4th St

900 Omnicare Center

City

Cincinnati

State

OH

Zip Code

45202-4248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Omnicare, Inc.

Occupation

VP, Pharmacy Operations, LTC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2016

Transaction ID : 20160509171312-1096

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Thomas Schleigh Jr

Mailing Address 201 E 4th St

900 Omnicare Center

City

Cincinnati

State

OH

Zip Code

45202-4248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Omnicare, Inc.

Occupation

VP, Pharmacy Operations, LTC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2016

Transaction ID : 20160509171312-1097

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Robert Schmidt

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Region Manager, Fld Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2016

Transaction ID : 20160509171312-1098

Amount of Each Receipt this Period

83.33

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.33

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Gregory Sciarra

Mailing Address 1 Cvs Dr

City	State	Zip Code
Woonsocket	RI	02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Internal Operations LTC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

Transaction ID : 20160509171312-1103

Amount of Each Receipt this Period

62.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bernard Segal

Mailing Address 1 Cvs Dr

City	State	Zip Code
Woonsocket	RI	02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director,IT Retail Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

Transaction ID : 20160509171312-1109

Amount of Each Receipt this Period

62.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Robert SendewiczMailing Address 200 Campus Dr
Ste 310

City	State	Zip Code
Florham Park	NJ	07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director,IT PBM Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2016

Transaction ID : 20160509171312-1109

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

175.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Robert SendewiczMailing Address 200 Campus Dr
Ste 310

City	State	Zip Code
Florham Park	NJ	07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, IT PBM Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2016

Transaction ID : 20160509171312-1110

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Robert SendewiczMailing Address 200 Campus Dr
Ste 310

City	State	Zip Code
Florham Park	NJ	07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director, IT PBM Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2016

Transaction ID : 20160509171312-1111

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kay Shafer

Mailing Address 9501 E Shea Blvd

City	State	Zip Code
Scottsdale	AZ	85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Account Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2016

Transaction ID : 20160509171312-1112

Amount of Each Receipt this Period

78.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

178.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Kay Shafer

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Account Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-1113

Amount of Each Receipt this Period

78.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kay Shafer

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Account Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : 20160509171312-1114

Amount of Each Receipt this Period

78.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Prem Shah

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Specialty Program Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-1115

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

406.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Leonard Shankman

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Strategic Specialty Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-1116

Amount of Each Receipt this Period

62.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Julie Sheer

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Clinical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-1117

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Julie Sheer

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Clinical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-1118

Amount of Each Receipt this Period

28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 76 OF 98

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Julie Sheer

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Clinical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.65

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-1119

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bonnie Shimko

Mailing Address 19070 S Tamiami Trl

City

Fort Myers

State

FL

Zip Code

33908-4704

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Pharmacy Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.02

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-1124

Amount of Each Receipt this Period

54.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bonnie Shimko

Mailing Address 19070 S Tamiami Trl

City

Fort Myers

State

FL

Zip Code

33908-4704

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Pharmacy Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.02

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-1125

Amount of Each Receipt this Period

54.17

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

137.19

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Bonnie Shimko

Mailing Address 19070 S Tamiami Trl

City

Fort Myers

State

FL

Zip Code

33908-4704

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Pharmacy Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2016

Transaction ID : 20160509171312-1126

Amount of Each Receipt this Period

54.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. William Shrank

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

CMO,Provider Innov & Analytic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2016

Transaction ID : 20160509171312-1127

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Peter Simmons

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP,Retail Product Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2016

Transaction ID : 20160509171312-1135

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

304.17

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Jeffrey SinkoMailing Address 200 Campus Dr
Ste 310City State Zip Code
Florham Park NJ 07932-1007FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP, AGC Board of Rx Practice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016**Transaction ID : 20160509171312-1136**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tracy Smith

Mailing Address 200 Highland Corporate Dr

City State Zip Code
Cumberland RI 02864-1786FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016**Transaction ID : 20160509171312-1151**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Yvonne Southwell

Mailing Address 2211 Sanders Rd

City State Zip Code
Northbrook IL 60062-6150FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016**Transaction ID : 20160509171312-1153**

Amount of Each Receipt this Period

77.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

427.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Carolyn Stang

Mailing Address 9501 E Shea Blvd

City State Zip Code
 Scottsdale AZ 85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Exec Advisor, Medicare Svs MedD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

693.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 01 / 2016

Transaction ID : 20160509171312-1161

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Carolyn Stang

Mailing Address 9501 E Shea Blvd

City State Zip Code
 Scottsdale AZ 85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Exec Advisor, Medicare Svs MedD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

693.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : 20160509171312-1162

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Carolyn Stang

Mailing Address 9501 E Shea Blvd

City State Zip Code
 Scottsdale AZ 85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Exec Advisor, Medicare Svs MedD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

693.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 29 / 2016

Transaction ID : 20160509171312-1163

Amount of Each Receipt this Period

77.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

231.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Paul Stivender

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Facilities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.32

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-1167

Amount of Each Receipt this Period

108.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Randal Stowell

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director,HR Bus Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-1172

Amount of Each Receipt this Period

62.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Shereen Stutz

Mailing Address 105 Mall Blvd

City

Monroeville

State

PA

Zip Code

15146-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director,Program Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-1174

Amount of Each Receipt this Period

28.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

199.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Shereen Stutz

Mailing Address 105 Mall Blvd

City

Monroeville

State

PA

Zip Code

15146-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Program Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-1175

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Shereen Stutz

Mailing Address 105 Mall Blvd

City

Monroeville

State

PA

Zip Code

15146-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Program Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-1176

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Andrew Sussman

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

EVP, ACMO and President MC

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.64

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-1180

Amount of Each Receipt this Period

416.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

474.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Theresa Talbott

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Advisor, Government Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2016

Transaction ID : 20160509171312-1185

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Theresa Talbott

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Advisor, Government Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2016

Transaction ID : 20160509171312-1186

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Theresa Talbott

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Advisor, Government Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2016

Transaction ID : 20160509171312-1187

Amount of Each Receipt this Period

38.46

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

115.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Craig Thiele

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

AVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-1200

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cia Tucci

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VPMM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-1228

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Anna Umberto

Mailing Address 200 Highland Corporate Dr

City

Cumberland

State

RI

Zip Code

02864-1786

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP, Strategic Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-1241

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. David Valois

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director,HR Bus Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-1249

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Susan Vandersall

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Director,Talent Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-1253

Amount of Each Receipt this Period

62.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ann Walker

Mailing Address 1275 Pennsylvania Ave NW
Ste 700

City

Washington

State

DC

Zip Code

20004-2448

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Exec Advisor,Gov't Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-1261

Amount of Each Receipt this Period

28.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

291.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Ann Walker

Mailing Address 1275 Pennsylvania Ave NW
Ste 700

City State Zip Code
Washington DC 20004-2448

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Exec Advisor, Gov't Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-1262

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ann Walker

Mailing Address 1275 Pennsylvania Ave NW
Ste 700

City State Zip Code
Washington DC 20004-2448

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Exec Advisor, Gov't Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : 20160509171312-1263

Amount of Each Receipt this Period

28.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gloria Walker

Mailing Address 6950 Alamo Downs Pkwy
Ste 110

City State Zip Code
San Antonio TX 78238-4502

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Customer Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-1264

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Gloria Walker

Mailing Address 6950 Alamo Downs Pkwy
Ste 110

City State Zip Code
San Antonio TX 78238-4502

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Customer Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-1265

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Gloria Walker

Mailing Address 6950 Alamo Downs Pkwy
Ste 110

City State Zip Code
San Antonio TX 78238-4502

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Director, Customer Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : 20160509171312-1266

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Calvin Wasdyke

Mailing Address 1 Cvs Dr

City State Zip Code
Woonsocket RI 02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP, PBM Strategic Ops & Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-1271

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

320.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Hanley Wheeler

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP, Field Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-1285

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Carolyn Wiesenbahn

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

SVP Human Resources CVS Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-1290

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kathleen Williams

Mailing Address 200 Campus Dr
Ste 310

City

Florham Park

State

NJ

Zip Code

07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Head of Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

04 / 12 / 2016

Transaction ID : 20160509171312-1303

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Sabrina Williams

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Account Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

04 / 01 / 2016

Transaction ID : 20160509171312-1313

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sabrina Williams

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Account Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

04 / 15 / 2016

Transaction ID : 20160509171312-1314

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sabrina Williams

Mailing Address 9501 E Shea Blvd

City

Scottsdale

State

AZ

Zip Code

85260-6719

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Account Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

04 / 29 / 2016

Transaction ID : 20160509171312-1315

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Christopher Wilson

Mailing Address 200 Campus Dr
Ste 310

City State Zip Code
Florham Park NJ 07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Market Intelligence

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-1317

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Christopher Wilson

Mailing Address 200 Campus Dr
Ste 310

City State Zip Code
Florham Park NJ 07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Market Intelligence

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-1318

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Christopher Wilson

Mailing Address 200 Campus Dr
Ste 310

City State Zip Code
Florham Park NJ 07932-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Market Intelligence

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : 20160509171312-1319

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Clay Wilson

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-1320

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Erik Woehrmann

Mailing Address 2211 Sanders Rd

City

Northbrook

State

IL

Zip Code

60062-6150

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Exec Advisor, Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-1321

Amount of Each Receipt this Period

62.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. William Yates

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Advisor Rx Clinical Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : 20160509171312-1338

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

212.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. William Yates

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Advisor Rx Clinical Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : 20160509171312-1339

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. William Yates

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

Sr Advisor Rx Clinical Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : 20160509171312-1340

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. June Youngs

Mailing Address 1 Cvs Dr

City

Woonsocket

State

RI

Zip Code

02895-6146

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS Health

Occupation

VP Logistics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : 20160509171312-1344

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

260.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Barbara Zarowitz

Mailing Address 201 E 4th St

900 Omnicare Center

City

Cincinnati

State

OH

Zip Code

45202-4248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Omnicare, Inc.

Occupation

VP, Chief Clinical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 08 / 2016

Transaction ID : 20160509171312-1346

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Barbara Zarowitz

Mailing Address 201 E 4th St

900 Omnicare Center

City

Cincinnati

State

OH

Zip Code

45202-4248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Omnicare, Inc.

Occupation

VP, Chief Clinical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 22 / 2016

Transaction ID : 20160509171312-1347

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

26816.23

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Cummings for Congress Campaign Committee

Mailing Address PO Box 1631

City Baltimore	State MD	Zip Code 21203
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Purpose of Disbursement
2016 Primary

Candidate Name

Elijah E. CummingsOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2016

Transaction ID : 7F8A93C23CCE2CE642C

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Marino for Congress

Mailing Address PO Box 653

City Williamsport	State PA	Zip Code 17703
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Purpose of Disbursement
2016 Primary

Candidate Name

Thomas Anthony MarinoOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2016

Transaction ID : BB4AF8B16EFFCAEB45D

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. New Millennium PACMailing Address 700 13th Street NW
Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Disbursement
2016 Contribution

Candidate Name

New Millennium PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☐ General
☒ Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2016

Transaction ID : 52BDC7D3CF8F6A2BBDC

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Breaux for Indiana

Mailing Address PO Box 26267

City	State	Zip Code
Indianapolis	IN	46226

Purpose of Disbursement
Void of 11/2015 Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : 2D0CAAFFDC0A1E56A3D

Amount of Each Disbursement this Period

-300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Committee to Elect Hite

Mailing Address 2417 Westmoor Road

City	State	Zip Code
Findlay	OH	45840

Purpose of Disbursement
Void of 11/2015 Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : 20A4481B2B14DFFA74D

Amount of Each Disbursement this Period

-500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Committee to Re-elect David Meeks

Mailing Address 2 Concord Drive

City	State	Zip Code
Conway	AR	72034

Purpose of Disbursement
Void of 10/2015 Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : 4872BDAA38E95B3D5DF

Amount of Each Disbursement this Period

-500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-1300.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Committee to Reelect David Fielding

Mailing Address 909 South Vine

City
MagnoliaState
ARZip Code
71753Purpose of Disbursement
Void of 10/2015 Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : 92C54F3663049AFF4C6

Amount of Each Disbursement this Period

-500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Committee to Reelect Jeremy Gilliam

Mailing Address 1825 Missile Base Road

City
JudsoniaState
ARZip Code
72081Purpose of Disbursement
Void of 10/2015 Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : FC2144B7016A4B5E653

Amount of Each Disbursement this Period

-2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Committee to Reelect Jon Woods

Mailing Address PO Box 8082

City
SpringdaleState
ARZip Code
72766Purpose of Disbursement
Void of 10/2015 Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : 41C00E0CFF079DC765E

Amount of Each Disbursement this Period

-1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-3500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Committee to Reelect Jonathan Dismang

Mailing Address PO Box 475

City	State	Zip Code
Beebe	AR	72012

Purpose of Disbursement
Void of 10/2015 Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : F4EE980FE09E775B12D

Amount of Each Disbursement this Period

-2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Committee to Reelect Rick Beck

Mailing Address 1091 Dutton Mountain Road

City	State	Zip Code
Center Ridge	AR	72027

Purpose of Disbursement
Void of 10/2015 Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : A5D0F4FBDE8D623ACCB

Amount of Each Disbursement this Period

-500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Committee to Reelect Rob Ballinger

Mailing Address 607 Eureka Avenue

City	State	Zip Code
Berryville	AR	72616

Purpose of Disbursement
Void of 10/2015 Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : 36D33C3B3E765FB74B9

Amount of Each Disbursement this Period

-500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

-3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Jodie Anne Laubenberg Campaign

Mailing Address PO Box 1154

City	State	Zip Code
Wylie	TX	75098

Purpose of Disbursement
Void of 9/2010 Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2016

Transaction ID : 681EF4574F571A4AEC7

Amount of Each Disbursement this Period

-1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Rep. Robert Meza

Mailing Address 1919 West Virginia Avenue

City	State	Zip Code
Phoenix	AZ	85009

Purpose of Disbursement
Void of 11/2015 Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2016

Transaction ID : 715940F2166E975BC5A

Amount of Each Disbursement this Period

-150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Republican Assembly Campaign Committee

Mailing Address 148 East Johnson

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement
Void of 10/2015 Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2016

Transaction ID : BE226CD3BB35B0F80BB

Amount of Each Disbursement this Period

-1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

-2650.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CVS Health PAC

Full Name (Last, First, Middle Initial)

A. Senator Nicole Poolman

Mailing Address 6517 Misty Waters Drive

City	State	Zip Code
Bismarck	ND	58503

Purpose of Disbursement
Void of 10/2015 Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : 89F472E5B0EDC711CB6

Amount of Each Disbursement this Period

-200.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

-200.00

-10650.00
